

OCT-14-2003 TUE 10:02 AM SHAFFER&CULBERTSON

FAX NO. 850 834 4143

P. 03

PTO/SSAB (08-03)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Cranium CorporationApplication No./Patent No.: 6,303,882 Filed/Issue Date: October 16, 2001Entitled: LOAD CELL APPARATUS AND METHODCranium Corporation a Texas corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. the assignee of the entire right, title, and interest; or2. an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %
in the patent application/patent identified above by virtue of either:A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 01062, Frame 0756, or for which a copy thereof is attached.

OR

B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached. Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached.
(NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

10/14/03

Stephen J. Cochran

Date
512-444-1050

Typed or printed name

Telephone number

Signature

President

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Times will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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OCT-14-2003 TUE 10:04 AM SHAFFER&CULBERTSON

FAX NO. 650 834 4143

P. 05

PTO/SB/02 (07-03)

Approved for use through 01/31/2004. GAMS D651-0033
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION DECLARATION BY THE ASSIGNEE		Docket Number (optional) 101-861
<p>I hereby declare that:</p> <p>The residence, mailing address and citizenship of the inventors are stated below.</p> <p>I am authorized to act on behalf of the following assignee: <u>Cranium Corporation</u></p> <p>and the title of my position with said assignee is: <u>President</u></p> <p>The entire site to the patent identified below is vested in said assignee.</p>		
Inventor Thomas W. Stephens	Citizenship US	
Residence/Mailing Address 4300 E. Whitetree Blvd., Leander, Texas 78641		
Inventor Donald R. Zrudeky	Citizenship US	
Residence/Mailing Address 187 River Road, Liberty Hill, Texas 78642		
<input checked="" type="checkbox"/> Additional inventors are named on separately numbered sheets attached hereto.		
Patent Number 6,903,862	Date of Patent Issued October 16, 2001	
Title of Invention LOAD CELL APPARATUS AND METHOD		
<p>I believe said inventor(s) to be the original and first inventor(s) of the subject matter which is described and claimed in said patent, for which a reissue patent is sought on the invention entitled:</p> <hr/> <p>the specification of which</p>		
<input checked="" type="checkbox"/> is attached hereto. <input type="checkbox"/> was filed on _____ as reissue application number _____ / and was amended on _____ (if applicable)		
<p>I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.</p>		
<p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.</p>		
<input type="checkbox"/> I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/02B (or equivalent) listing the foreign applications.		
<p>I verify below the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)</p>		
<input type="checkbox"/> by reason of a defective specification or drawing. <input checked="" type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent. <input type="checkbox"/> by reason of other errors.		

[Page 1 of 2]

This collection of information is required by 37 CFR 1.176. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

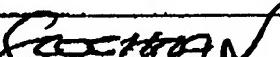
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NOT-14-2003 TUE 10:05 AM SHAFFER&CULBERTSON

FAX NO. 850 934 4143

PTD/8552 (07-03)
Approved for use through 01/31/2004, GMB 0881-0033
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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REISSUE APPLICATION DECLARATION BY THE ASSIGNEE		Docket Number (Optional) 101-881																									
At least one error upon which reissue is based is described as follows: Less was claimed than was allowable. (Attach additional sheets, if needed.)																											
All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. I hereby appoint:																											
<input type="checkbox"/> Practitioners at Customer Number: <input type="text"/> <p style="text-align: center;">OR</p> <input checked="" type="checkbox"/> Practitioner(s) named below:																											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Name</th> <th style="width: 50%;">Registration Number</th> </tr> </thead> <tbody> <tr> <td>J. Nevin Shaffer, Jr.</td> <td>29,858</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table>				Name	Registration Number	J. Nevin Shaffer, Jr.	29,858	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>														
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.																											
Correspondence Address: Direct all communications about the application to:																											
<input type="checkbox"/> Customer Number: <input type="text"/> <p style="text-align: center;">OR</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;"><input checked="" type="checkbox"/> Firm or Individual Name</td> <td colspan="3">Shaffer & Culbertson</td> </tr> <tr> <td>Address</td> <td colspan="3">913 Gulf Breeze Parkway</td> </tr> <tr> <td>Address</td> <td colspan="3">Suite 43</td> </tr> <tr> <td>City</td> <td>Gulf Breeze</td> <td>State</td> <td>Florida</td> </tr> <tr> <td>Country</td> <td colspan="3">US</td> </tr> <tr> <td>Telephone</td> <td>850-934-4124</td> <td>Fax</td> <td>850-934-4143</td> </tr> </table>				<input checked="" type="checkbox"/> Firm or Individual Name	Shaffer & Culbertson			Address	913 Gulf Breeze Parkway			Address	Suite 43			City	Gulf Breeze	State	Florida	Country	US			Telephone	850-934-4124	Fax	850-934-4143
<input checked="" type="checkbox"/> Firm or Individual Name	Shaffer & Culbertson																										
Address	913 Gulf Breeze Parkway																										
Address	Suite 43																										
City	Gulf Breeze	State	Florida																								
Country	US																										
Telephone	850-934-4124	Fax	850-934-4143																								
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.																											
Full name of person signing (given name, family name) Stephen J. Cochran																											
Signature 		Date 10/14/03																									
Address of Assignee Crumlin Corporation, 1505 Cliffside Drive, Austin, Texas 78704																											

OCT-14-2003 TUE 10:03 AM SHAFFER&CULBERTSON

FAX NO. 850 934 4143

P. 04

PTO/SB/53 (05-03)

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REISSUE APPLICATION: CONSENT OF ASSIGNEE; STATEMENT OF NON-ASSIGNMENT		Docket Number (Optional) 101-881
This is part of the application for a reissue patent based on the original patent identified below.		
Name of Patentee(s) Thomas W. Stephens and Donald R. Zrudsky		
Patent Number 6,303,882	Date Patent Issued October 16, 2001	
Title of Invention LOAD CELL APPARATUS AND METHOD		
<p>1. <input checked="" type="checkbox"/> Filed herein is a statement under 37 CFR 3.73(b). (Form PTO/SB/96)</p> <p>2. <input type="checkbox"/> Ownership of the patent is in the inventor(s), and no assignment of the patent is in effect.</p>		
<p>One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee".</p> <p>The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.</p>		
<p>The assignee(s) owning an undivided interest in said original patent is/are <u>Cranium Corporation</u>, and the assignee(s) consents to the accompanying application for reissue.</p>		
Name of assignee/inventor (if not assigned)		
Signature 	Date 10-14-03	
Typed or printed name and title of person signing for assignee (if assigned)		
Stephen J. Cochran, President		

This collection of information is required by 37 CFR 1.172. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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OCT-14-2003 TUE 10:01 AM SHAFFER&CULBERTSON

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P. 02

Please type a plus sign (+) inside this box → +

PTO/SB/81 (02-01)

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	09/523,385
Filing Date	March 10, 2000
First Named Inventor	Thomas W. Stephens et al.
Title	Load Cell Apparatus and Method
Group Art Unit	2859
Examiner Name	R. Gibson
Attorney Docket Number	101-881

I hereby appoint:

- Practitioners at Customer Number → Place Customer Number Bar Code Label here
- OR
- Practitioner(s) named below:

Name	Registration Number
J. Nevin Shaffer, Jr.	28,858

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

- The above-mentioned Customer Number.
- OR
- Practitioners at Customer Number → Place Customer Number Bar Code Label here
- OR

<input checked="" type="checkbox"/> Firm or Individual Name	Shaffer & Culbertson			
Address	813 Gulf Breeze Parkway			
Address	Suite 43			
City	Gulf Breeze	State	Florida	Zip
Country	United States			
Telephone	850-934-4124	Fax	850-934-4143	

I am the:

- Applicant/inventor.

- Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98).

SIGNATURE of Applicant or Assignee of Record

Name	Cranium Corporation, by Stephen J. Cochran, President		
Signature			
Date	10-14-03		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of 1 form are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.